	PATENT A	APPLICATIO Effect	RD	01684846									
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TC	TAL CLAIMS		17				Г	RATE	FEE]	RATE	FEE	
FO	R		NUMBER FILED		NUMBER EXTRA		ВА	ASIC FEE	355.00	OR	BASIC FEE	710.00	
то	TAL CHARGEA	BLE CLAIMS) minus 20=		•			X\$ 9=		OR	X\$18=	· · · · · · · · · · · · · · · · · · ·	
IND	EPENDENT CL	AIMS	3 minus 3 =		*		-	X40=		1	X80=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT		<u> </u>		\vdash			OR	700=		
* If the difference in column 1 is less than zero enter "O" in column 2								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								OTAL		OR	TOTAL	710	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								MALL	ENTITY	OR	OTHER SMALL I		
ENT A		CLAIMS REMAINING AFTER AMENDMENT	*	HIGH NUM PREVIO	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
ME	Independent	*	Minus	***		=		X40=		OR	X80=		
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							-135=			+270=		
										OR	TOTAL		
(Column 1) (Column 2) (Column 3)								TOTAL DIT. FEE		OR	ADDIT. FEE	<u></u>	
AMENDMENT B	(Column 1) CLAIMS			(Colui					ADDI-	1		ADDI	
		REMAINING AFTER AMENDMENT	٠	PREVIO PAID	DUSLY	PRESENT EXTRA	F	RATE	TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	,	K\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	7	X40=		OR	X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	TIPLE DEPENDENT CLAIM				105			070	_	
	المجمئين المتعالي		4				Ľ	135= TOTAL		OR	+270= TOTAL		
		•					ADI	DIT. FEE		OR	ADDIT. FEE		
_		(Column 1) CLAIMS		(Colur		(Column 3)							
AMENDMENT C	c ī	REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	F	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	(\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		(40=			X80=		
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	LTIPLE DEPENDENT			\vdash			OR	\000=	-	
+135= OR +270=													
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OR TOTAL ADDIT. FEE												
		mber Previously Pa nber Previously Pai					found	in the app	oropriate box				

Application or Docket Number